

## **Mixed Earners Unemployment Compensation (MEUC) Application**

(Upload your completed application, tax return, and any supporting documents through the IDES document upload portal. For more information, please visit our webpage at ides.illinois.gov/MEUC.)

Personal Information	
First Name:	Last Name:
Date of Birth:	Claimant ID:
Phone Number:	E-mail Address:
1. As of 12/27/2020 or later, have y (PUA) program? Yes No	you received benefits from the Pandemic Unemployment Assistance
<b>If yes, please stop.</b> You are not eligible Pandemic Unemployment Assistance	ble for MEUC. This program does not apply to individuals receiving (PUA).
If no, please continue.	
2. Have you applied for and receive Yes No No	red benefits from the Unemployment Insurance (UI) benefits program?
If yes, what date did you file you	ur initial claim for benefits?
3. Please select the current benefit Finding letter to determine your	program in which you are receiving benefits. Refer to your UI benefit program.
Unemployment Insurance (	UI)
Pandemic Emergency Unen	nployment Compensation (PEUC)
Extended Benefits (EB)	
Trade Readjustment Allowa	ance (TRA)
4. Did you earn at least \$5,000 in r Unemployment Insurance benef	net self-employment income during the tax year before you applied for its? Yes No No
If so, check the applicable year(	s): 2019
*Note: Net income is the amoun	nt you earned after taxes and all other deductions.
5. Did you file a new benefit year	claim in 2020? Yes No No
Did you file an income tax retur	rn for tax year 2019? Yes No

If yes, what was the net income reported on your tax document to the IRS?



st Name:	Last Name:
imant ID:	
6. Did you file a new benefit ye	ear claim in 2021? Yes No No
Did you file an income tax re	eturn for tax year 2020? Yes No
If yes, what was the net incor	me reported on your tax document to the IRS?
7. Please list the business/type o	of self-employment you performed.
8. If you have a FEIN or Emplo	oyer account number, please provide it here:
9. Can you provide proof of self	f-employed earnings? Yes No No
•	t and any other supporting documents. lle C, Schedule K-1 (Form 1065))
11	eation must be provided with this application. A determination will be ses to the application questions and documents provided at the time
information for my MEUC benefithat the law prescribes penalties understand that the information sube used by other Federal, State, obe used by IDES in determining resection 1900 of the Unemployme	I Earners Unemployment Compensation (MEUC) benefits. I certify that the fit claim is true and correct to the best of my knowledge and belief. I am awar so of fine and imprisonment for making false statements to obtain benefits. Unbmitted by me may be verified through computer matching programs and mater Local Agencies, and that information submitted by me to these agencies with the eligibility and amount of MEUC benefits. I also understand that, pursuant the tent Insurance Act, any information that I provide to IDES in connection with the emer employers or their representatives.
Signature:	
Date:	